

**Political Organization  
Notice of Section 527 Status**

OMB No. 1545-1693

**Part I General Information**

**1 Name of organization**

Americans for Jobs & Healthcare

**Employer identification number**

80 - 0081307

**2 Mailing address (P.O. box or number, street, and room or suite number)**

432 Main Street, PMB 136

**City or town, state, and ZIP code**

Windermere, FL 34786 - 8648

**3 Check applicable box:**

☒ Initial notice

☐ Amended notice

☐ Final notice

**4a Date established**

11/13/2003

**4b Date of material change**

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**5 E-mail address of organization**

traftis@jobsandhealthcare.org

**6a Name of custodian of records**

Timothy L. Raftis

**Custodian's address**

432 Main Street, PMB 136

Windermere, FL 34786 - 8648

**7a Name of contact person**

Timothy L. Raftis

**Contact person's address**

432 Main Street, PMB 136

Windermere, FL 34786 - 8648

**8 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number**

432 Main Street, PMB 136

**City or town, state, and ZIP code**

Windermere, FL 34786 - 8648

**9a Election authority**

NONE

**9b Election authority identification number**

**Part II Notification of Claim of Exemption From Filing Certain Forms (see instructions)**

**10a** Is this organization claiming exemption from filing Form 8872, Political Organization Report of Contributions and Expenditures, as a qualified state or local political organization? Yes ☐ No ☒

**10b** If 'Yes,' list the state where the organization files reports:

**11** Is this organization claiming exemption from filing Form 990 (or 990-EZ), Return of Organization Exempt from Income Tax, as a caucus or associations of state or local officials? Yes ☐ No ☒

**Part III Purpose**

**12 Describe the purpose of the organization**

To engage in election-related activity for the purpose of supporting jobs and healthcare issues.

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**Part IV**   **List of All Related Entities** (see instructions)

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**13** Check if the organization has no related entities. . . . . ☒

<b>14a</b> Name of related entity	<b>14b</b> Relationship	<b>14c</b> Address
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**Part V**   **List of All Officers, Directors, and Highly Compensated Employees** (see instructions)

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<b>15a</b> Name	<b>15b</b> Title	<b>15c</b> Address
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Under penalties of perjury, I declare that the organization named in Part I is to be treated as a tax-exempt organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that I am the official authorized to sign this report, and I am signing by entering my name below.

Timothy L. Raftis

11/14/2003

**Sign  
Here**



\_\_\_\_\_  
Name of authorized official



\_\_\_\_\_  
Date

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